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December 1, 2019

TO: Prospective Applicants

FROM: Gary Tsai, M.D., Interim Division Director 
Substance Abuse Prevention and Control

SUBJECT: **APPLICATION FOR DRUG MEDI-CAL CONTRACTS**

The approval of the State of California's Medi-Cal 2020 Section 1115(a) Waiver Demonstration Project enabled Los Angeles County to increase access to substance use disorder (SUD) treatment services for adolescents and adults who are eligible for Medi-Cal. The Waiver, also known as the System Transformation to Advance Recovery and Treatment, expands Drug Medi-Cal (DMC) reimbursable services beyond outpatient, intensive outpatient, and opioid (narcotic) treatment program to create a fuller continuum of care that includes withdrawal management, Medication-Assisted Treatment (MAT), short-term residential, case management and care coordination with physical and mental health, and recovery support services.

With the new benefits comes the responsibility to make placement decisions based on the American Society of Addiction Medicine Criteria and medical necessity; to provide care at the lowest and most appropriate level of care (LOCs), including improved transitions between LOCs; and to use MAT in conjunction with other treatment services.

Substance Abuse Prevention and Control (SAPC) is committed to creating and maintaining a strong and diverse provider network to meet the SUD treatment needs of Los Angeles County and the provisions of the Waiver. SAPC has developed a set of minimum programmatic and fiscal requirements that prospective applicants must meet before they will be considered for a contract.

Please note agencies interested in providing DMC reimbursable services must meet all the license and certification requirements as established by the State of California Department of Health Care Services and Los Angeles County. Attachment A lists minimum requirements that all agencies must meet in order to contract with SAPC. Attachment B lists required documentation for those who meet minimum requirements from Attachment A. Opioid Treatment Providers must also submit additional documents listed on Attachment C.

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Please submit the required documentation listed in Attachments A, B, and C (if applicable) to initiate the application process. Your timely response to requests for additional information will assist SAPC in completing the review process. Please be advised that services rendered prior to the contract execution are not eligible for reimbursement.

If awarded a contract, initial allocation is based on assessment of needs. Future increases may be awarded based on an assessment of performance, utilization, and needs.

If you have any questions or need additional information, please contact Contracts and Compliance Section at (626) 299-4532. Thank you.

GT:dd

Attachments

c: Barbara Ferrer
Emily Issa
Daniel Deniz

COUNTY OF LOS ANGELES – DEPARTMENT OF PUBLIC HEALTH
SUBSTANCE ABUSE PREVENTION AND CONTROL

MINIMUM REQUIREMENTS TO CONTRACT WITH THE COUNTY OF LOS ANGELES
FOR DRUG MEDI-CAL SERVICES

1. Residential treatment facilities must be Alcohol and/or Other Drug (AOD) licensed, including American Society of Addiction Medicine (ASAM) designation for all levels of care and Drug Medi-Cal (DMC) certified by the State of California Department of Health Care Services (DHCS), as described in item 10, to operate and maintain an alcohol and/or other drug abuse treatment facility at the time of application for a County contract. Contract awarded will be based on licensure and/or certification status.
2. Outpatient treatment facilities must be Drug Medi-Cal (DMC) certified by the State of California Department of Health Care Services (DHCS), as described in item 10, to operate and maintain an alcohol and/or other drug abuse treatment facility at the time of application for a County contract. Contract awarded will be based on certification status.
3. Agency must meet at least one (1) of the two (2) following requirements:
 - Have an active and in good standing government contract for the provision of behavioral health services for a minimum of three (3) consecutive years.
 - Be fully accredited and in good standing by either Joint Commission or Commission on Accreditation of Rehabilitation Facilities.
4. If the agency had prior County contracts, those contracts must have been in good standing and be in compliance with applicable laws and specific contract requirements. Agencies must be in good standing with both DHCS and the County of Los Angeles based on a review of prior audits and performance reviews.
5. Agencies must have a minimum of three (3) years out of the last five (5) years experience in providing comprehensive culturally competent, evidence-based behavioral health services.
6. Agencies must demonstrate via memorandums of understanding collaborative relationships with existing service agencies that provide substance abuse prevention, treatment and recovery support activities.
7. Agencies must have a procedure in place for referring program participants to lower or higher levels of care as needed.
8. Agencies must have a procedure in place for administering or referring patients to Medication Assisted Treatment (MAT) as a concurrent treatment for individuals with an alcohol and/or opioid related SUD condition.
9. Agencies must pass a financial viability test based upon its financial records and show a minimum of sixty (60) day operational reserve.

10. Agencies must show proof of the availability of credentialed, licensed, and experienced staff, as required by federal, State, and County laws, guidelines, and other requirements, some of which are listed below:

- Medical Director must be licensed by the Medical Board of California or Osteopathic Medical board of California.
- Licensed Practitioner of the Healing Arts (LPHA) which includes Physicians, Nurse Practitioners, Physician Assistants, Registered Nurses, Registered Pharmacist, Licensed Clinical Psychologists (LCP), Licensed Clinical Social Workers (LCSW), Licensed Professional Clinical Counselors (LPCC), Licensed Marriage and Family Therapists (LMFT), and license-eligible practitioners working under the supervision of licensed clinicians.
- Counseling staff must have at least two (2) years of experience in providing alcohol and/or other drug abuse services and information to persons with a substance use disorder. Counselors must be registered or certified with a DHCS approved certifying organization in accordance with Health and Safety Code 11833(b)(1).
- Program director/administrator must have two (2) years' experience providing alcohol and/or other drug abuse services, one (1) year supervising personnel, and one (1) year managing accounting processes that include budgets.
- Staff employed by agencies in key positions or services vulnerable communities must have a Live Scan fingerprint check for criminal history background through the State of California Department of Justice (DOJ) and the Federal Bureau of Investigation (FBI) prior to employment.

11. **Level of Care Additional Licensing/Certification Requirements:**

Level of Care	ASAM Level	AOD License /Certification	DMC Certification	ASAM Designation	Other
Outpatient Treatment (OT)	1.0	N/A	OT	N/A	
Intensive Outpatient Treatment (IOT)	2.1	N/A	IOT	N/A	
Residential Services (RS) – Adult	3.1, 3.3, 3.5	RS	RS	3.1, 3.3, 3.5	
Residential Services (RS) – Youth	3.1, 3.3, 3.5	N/A	RS	3.1, 3.3; 3.5	Group Home License issued by CDSS
Withdrawal Management (WM) – Ambulatory	2WM	Non-RS w/Detox Service Authorization	OT, IOT	N/A	Medical staffing plan showing ability to provide evaluation and withdrawal management services
Withdrawal Management (WM) – Residential	3.2	RS w/Detox Service Authorization	RS	3.2	
Opioid Treatment Program (OTP)	1-OTP	Narcotic Treatment Program	Narcotic Treatment Program	N/A	- Drug Enforcement Agency Registration - Substance Abuse and Mental Health Services Administration Certification

Inpatient Withdrawal Management – Medically Monitored	3.7-WM	RS w/Detox Service Authorization	RS	3.7	- Chemical Dependency Recovery Hospital <i>or</i> Acute Psychiatric Hospital - Physician and other medical professional staffing plan showing 24-hour physician availability and medical staff monitoring.
Inpatient Withdrawal Management – Medically Managed	4-WM	RS w/Detox Service Authorization	RS	4	Chemical Dependency Recovery Hospital <i>or</i> Acute Psychiatric Hospital - Physician and other appropriate trained professional staffing plan showing 24-hour on-site availability

12. Agencies licensed and certified to provider adult services must agree to comply with all applicable federal, State, and local regulations and laws including but not limited to: DHCS AOD Program Certification Standards, Title 9, Title 22 and Counselor Certification Standards.
13. Agencies licensed and certified to provide youth services must agree to comply with the State of California Youth Treatment Guidelines and the County of Los Angeles Youth Treatment Standards and Practices. Youth agencies must also meet the following requirements:
 - a. Must be authorized by the State of California to conduct criminal offender record information background checks, including both the State of California Department of Justice (DOJ) and the Federal Bureau of Investigation (FBI), for all staff providing direct services.
 - An Originating Agency Identification (ORI) number issued by the DOJ/FBI
 - Two (2) staff designated as Custodian of Record (COR)
 - Completed and signed documents by COR for all Agency staff providing direct services.
 - b. Policy and Procedures that demonstrates linkages and referrals designed for youth population for each ASAM Criteria Level of Care.
14. Agencies certified to provide Perinatal Services must agree to comply with the most current Perinatal Guidelines as issued by the Department of Health Care Services.
 - a. Must be authorized by the State of California to conduct criminal offender record information background checks, including both the State of California Department of Justice (DOJ) and the Federal Bureau of Investigation (FBI), for all staff providing direct services.
 - An Originating Agency Identification (ORI) number issued by the DOJ/FBI
 - Two (2) staff designated as Custodian of Record (COR)
 - Completed and signed documents by COR for all Agency staff providing direct services.
 - b. Policy and Procedures that demonstrates linkages and referrals designed for pregnant and/or parenting population for each ASAM Criteria Level of Care.
15. Agencies must be able to begin providing services within thirty (30) days of Contract award.
16. Providers must submit all clinical forms and documents to SAPC’s Medical Director for approval prior to providing treatment.

Agencies may be denied a contract for the following reasons:

- Failure to meet any of the requirements listed above.
- Board of Directors, Agency Director, Medical Director, or other key staff on active probation or parole within the last three (3) years.
- Board of Directors, Agency Director, Medical Director, or other key staff having a fraud/embezzlement conviction, conviction involving government agency or being on a government exclusion or debarment list.
- Submitting false or fraudulent documentation.
- Failure to complete application process or submit all required documentation within six (6) months of submission.
- Placement on the County's Contractor Alert Reporting Database (CARD) and/or prior poor performance on other County's contracts

REQUIRED CONTRACT DOCUMENTATION

The following is a list of documents your agency is required to provide to Substance Abuse Prevention and Control (SAPC) as part of the application process with the County of Los Angeles. Items **1 - 58** must be submitted or your application will be deemed incomplete and will not be processed.

Please submit all the following including a copies of all certificates, policies, or other documentation listed below:

1) Signed official Letter of Request to apply as a Drug Medi-Cal (DMC) contractor on agency letterhead that includes all the following:

- a. Description of services which are currently or will be provided
- b. Site location(s) and days and hours of operation
- c. Brief description of population(s) to be served including age group and/or special populations. Programs desiring to serve special groups or populations must state this clearly in the justification portion of the Letter of Request.

- **Hours of Operation** – All Outpatient and Intensive outpatient services are required to operate at least five (5) days per week, including one (1) weekend day, and at least two (2) days will include evening hours (5:00 PM to 9:00 PM, at a minimum). Opioid Treatment Programs shall ensure that Methadone is available seven (7) days per week in accordance with Title 9, Section 10260.

2) Evidence of Insurance

Documentation to be provided in the form of an “ACORD” insurance certificate or its equivalent.)

- (a)* **General Liability Insurance:** Insurance with limits of not less than the following:

General Aggregate:	\$2 Million
Products/Completed Operations Aggregate:	\$1 Million
Personal & Advertising Injury:	\$1 Million
Each Occurrence:	\$1 Million

- (b)* **Automobile Liability Insurance:** Insurance with a limit of liability of not less than \$1 Million for each accident. Such insurance shall include coverage for either “all owned, hired and non-owned vehicles,” or coverage for “any auto.”

- (c)* **Workers’ Compensation and Employers’ Liability Insurance:**

Insurance providing workers’ compensation benefits, as required by the Labor Code of the State of California, or by any other state, for which Agency is responsible. In all cases, the above insurance also shall include Employers’ Liability coverage with limits of not less than the following:

Each Accident:	\$1 Million
Disease – Policy Limit:	\$1 Million
Disease – Each Employee:	\$1 Million

- (d)* **Professional Liability Insurance:** Insurance covering liability arising from any error, omission, negligent or wrongful act of Agency, its officers or employees with limits of not less than \$1 Million per occurrence and \$3 Million aggregate. The coverage also shall provide an extended two-year reporting period commencing upon expiration or

earlier termination or cancellation of the Agreement. (Note: Professional Liability insurance cannot be combined with General Liability insurance and should be listed on the certificate in the box labeled, "Other".)

- (e)* **Sexual Misconduct Liability Insurance:** Insurance covering actual or alleged claims for sexual misconduct and/or molestation with limits of not less than Two Million Dollars (\$2,000,000) per claim and Two Million Dollars (\$2,000,000) aggregate, and claims for negligent employment, investigation, supervision, training or retention of, or failure to report to proper authorities, a person(s) who committed any act of abuse, molestation, harassment, mistreatment or maltreatment of a sexual nature.

*Provide a **COPY OF POLICY ENDORSEMENT PAGE** that indicates that the County of Los Angeles, its special Districts, Elected Officials, Officers, Agents, Employees and Volunteers shall be provided additional insured status in General Liability policy.

Note: Insurance shall be provided by an insurance company with an A.M. Best rating of not less than AX:VII unless otherwise approved by County.

- 3) **Licenses, Permits, and Certificates** – Provide copies of all appropriate licenses, permits, registrations, accreditations, and certificates required by federal, State (including Alcohol and Other Drugs ["AOD"] permits and/or certification), and local laws, regulations, guidelines and directives for the operations of the facility and for the provisions of services i.e., occupancy permit, business license, Opioid Treatment Program License, the State of California Department of Health Care Services (DHCS) License to provide Residential Services, and fire clearance for each location.
- 4) **Drug Medi-Cal (DMC) Certification**
- 5) **Electronic Health Record** – Agency must provide documentation of certified Electronic Health Record (EHR) or attest they intend to use Sage, the County's substance use disorder EHR.
- 6) **Affidavit of Form of Business Organization** – A notarized affidavit on agency letterhead, sworn to and executed by one of the officers of the agency's Board of Directors, indicating the Agency's type of business organization, i.e., sole proprietorship, partnership, or corporation, and whether the agency is substantively owned by another organization or has any financial interest in any other organization with whom it is doing business.
- 7) **Property Tax Compliance Acknowledgment Form** – Completed and signed by authorized representative. If the agency owns real property, the following documentation is also required:
 - (A) The location by street address and city of any real property
 - (B) The fair market value of any such real property
- 8) **Facility Lease(s)** – If renting or leasing the facility where services are to be provided. Lease must be current and include the name of the property owner, not just property management company.
- 9) **Business Disclosure** – Agency shall prepare and submit a detailed statement, executed by Agency's duly constituted officers, indicating whether Agency, any Directors or Staff, totally or partially owns any other business organization that will be providing services, supplies, materials, or equipment to Agency or in any manner does business with Agency under this Contract.
- 10) **Contract Signature Authorization** – A statement on agency letterhead, signed by one of the officers of the agency's Board of Directors, identifying one or more persons who are authorized by the agency's Board of Directors to sign contracts for the agency.

- 11) **Articles of Incorporation** – Include the face page which depicts the Seal of the State of California.
- 12) **By-Laws of the Corporation** – Shall indicate that the agency Board of Directors is composed of, at least, five (5) Directors.
- 13) **Roster of the Board of Directors** – Shall include names, professional titles, business addresses, contact information, and board titles i.e., Chairman, Secretary, etc., of each board member. A copy of valid California Department of Motor Vehicles (DMV) issued driver's license/identification card. Board of Directors shall be comprised of not less than five (5) members that include representatives of special populations group(s) being served.
- 14) **Roster of Community Advisory Board** – Shall contain names, professional titles, business addresses, contact information and board titles of each board member, i.e., President, Secretary, etc., and must indicate their ties to the community, i.e., lives or works in the community, and if working in the community, in what capacity and the name and address of the company where the individual works. With SAPC approval, the Board of Directors may serve as the Community Advisory Board.
- 15) **Organizational Chart** – Should show name of organization, chain of command with incumbents' name, position and job title, beginning with the board of directors, and should be dated to indicate that it is the most current depiction of the organizational structure of the agency.
- 16) **Medical Director's Agreement and Code of Conduct** – Agency's Medical Director shall work on site, two (2) hours per month at each owned and operated certified facility. This agreement must also contain Medical Director's responsibility, which includes but is not limited to: a) establishing, reviewing and maintaining medical policies and standards, b) assuring the quality of medical services given to all patients, c) assuring that at least one physician practicing at the clinic shall have admitting privileges to a general acute care hospital or a plan, as approved by SAPC, for ensuring needed hospital services. Written roles and responsibilities and a code of conduct for the medical director must be clearly documented, signed and dated by a provider representative and the physician. For opioid treatment programs, this requirement is the responsibility of the program sponsor and shall be met by the program sponsor entering into an agreement with a hospital official to provide general medical care in accordance with Title 9, CCR, Section 10340, d) assuring that a physician has assumed medical responsibility for all patients treated by the clinic (Title 9, CCR, Section 10110).
- 17) **Medical Director's License** – Copy of the Medical Director's current physician license issued by the Medical Board of California or Osteopathic Medical Board of California as well as a copy of California issued identification. License must be unrestricted and medical director cannot have been on any type of probation within the last three (3) years.
- 18) **Licensed Practitioner of the Healing Arts (LPHA)** – Copy of licenses for all LPHAs as well as copy of a current California issued identification. License must be unrestricted and LPHA cannot have been on any type of probation within the last three (3) years.
- 19) **DHCS Drug Medi-Cal Provider Enrollment Division (PED)** – Proof of enrollment of the substance use disorder Medical Director, licensed substance use disorder treatment professional, or substance use disorder non-physician medical practitioner to provide DMC services pursuant to CCR, Title 22, Section 55000.51. Agency shall only select providers who, prior to the delivery of services, are enrolled with DHCS under applicable state regulations, have been screened in accordance with 42 CFR 455.450(a) as a "limited" categorical risk by DHCS within a year prior to providing services and have signed a Medicaid provider agreement with DHCS as required by 42 CFR 431.107.

- 20) **Counseling Staff to be Licensed/Certified or Registered** – Counseling staff shall be State licensed/certified or enrolled with a DHCS approved Certifying Organization to obtain Certification as an Alcohol and Drug Counselor, as specified in Health and Safety Code 11833(b)(1). Submit copies of all licenses/certifications/registrations.
- 21) **Verification that at least thirty percent (30%) of all counseling staff is licensed or certified** – At least thirty percent (30%) of all staff providing counseling services in all AOD Programs must be licensed and/or certified by DHCS pursuant to the requirements of Section 13010, Title 9, Division 4, Chapter 8, Subchapter 2, California Code of Regulations. All other counseling staff shall be registered pursuant to Section 13035 (f).
- 22) **Staffing List** – Current list of all staff by name, professional title, and date of hire. Must include all levels of staff and expertise needed to provide treatment services. A job description must be included for each position listed and copies of resumes for all staff must be submitted.
- 23) **Staff Training/Development Program** – Agency must develop and submit a copy of its Staff Training and Development Program. Mandated trainings for all staff include, but are not limited to, HIV/AIDS/STI/Other Communicable Diseases, Cultural Competence, Trafficking Victims Protection Act of 2000, Motivational Interviewing, Cognitive Behavioral Therapy, ASAM, Hepatitis A, B, and C, Tuberculosis and Communicable Infection, CPR/First Aid, confidentiality, and other trainings as described in the most current version of the Provider Manual, SAPC Bulletins, and as may be required by the State.
- 24) **Criminal Record Clearance** – Staff employed by Agency and subcontractor(s), shall not be on active probation or parole within the last three (3) years, and must have a Live Scan fingerprint check for criminal history background through the State of California Department of Justice (DOJ) and the Federal Bureau of Investigation (FBI) prior to employment. The provider must be certified by the DOJ, have a valid Originating Agency Identifier (ORI) number, a Custodian of Records Designation Letter from DOJ, a policy outlining how the agency will ensure clearances, and a statement signed by the Custodian of Records certifying each staff has been cleared.
- 25) **Employment Eligibility (completed, signed, and dated I-9 Form)** – Agency warrants that it fully complies with all Federal statutes and regulations regarding employment of aliens and others, and that all its employees performing services hereunder meet the citizenship or alien status requirements contained in Federal statutes and regulations. Agency shall obtain, from all covered employees performing services hereunder, all verification and other documentation of employment eligibility status required by Federal statutes and regulations, as they currently exist and as they may be hereafter amended. Agency shall retain such documentation for all covered employees for the period prescribed by law. Provide a copy of each employee's completed I-9 Form.
- 26) **Program Code of Conduct Policy** – Agency shall submit documentation of its code of conduct that pertains to its staff, paid employees, and volunteers which addresses the following, but not limited to, prohibition of social/business relationship with patients; use of drug/alcohol; prohibition of sexual contact with patients; conflict of interest; providing services beyond scope; discrimination against staff or patients; verbal, physical, sexual harassment, etc.
- 27) **Quality Assurance Plan** – A copy of the Agency's quality assurance plan. Plan must describe strategies, practices, and polices that will be implemented to ensure the program is compliant to federal, State, and County regulations and requirements. Plan must also address how Agency controls and reviews what will be implemented to ensure the quality and effectiveness of the program.
- 28) **Network Adequacy Certification Policy** – Agency shall develop and implement policies and procedures for ensuring availability and submission of Network Adequacy Certifications (NAC)

information, including, but not limited to, information on the number of Medi-Cal patients served by each facility, proximity to public transportation, language assistance services provided by each facility, the Medi-Cal caseload of each LPHA/counselor providing direct services, and the language proficiency for each LPHA/counselor.

- 29) **Compliance with Fair Chance Employment Practices** – Agency shall submit an attestation that it is in compliance with hiring practices set forth in California Government Code Section 12952, Employment Discrimination. Conviction history.
- 30) **Whistleblower Protections** – Per federal statute 41 Unites States Code (U.S.C.) 4712, all employees working for contractors, grantees, subcontractors, and subgrantees on federal grants and contracts are subject to whistleblower rights, remedies, and protections and may not be discharged, demoted, or otherwise discriminated against as a reprisal for whistleblowing.
- 31) **Drug Free Work Place** – Agency must certify that it will comply with the requirements of Government Code Section 8350 et seq. (Drug-Free Work Place Act of 1990).
- 32) **Child Abuse Reporting Policy & Acknowledgement Form** – Agency understands that certain of its staff are “mandated reporters” as defined in the Child Abuse and Neglect Reporting Act, California Penal Code Section 11165.7. Section 11166 of the Penal Code requires a mandated reporter who, in his/her professional capacity or within the scope of his/her employment, has knowledge of or observes a child whom the mandated reporter knows or reasonably suspects has been the victim of child abuse or neglect to report the known or suspected abuse immediately or as soon as practically possible and to prepare and send a written report thereof within thirty-six (36) hours of receiving the information concerning the incident.
- 33) **Elder Abuse Reporting Policy & Acknowledgement Form** – Agency understands that certain of its staff are “mandated reporters” as defined in Welfare and Institutions Code Section 15630(a). In such case, Agency further understands that in suspected instances of elder or dependent adult abuse, such staffs have certain immediate and follow-up reporting responsibilities as described in Welfare and Institutions Code Section 15630. Agency staff’s failure to report as required is considered a breach of contract subject to immediate termination and is also a misdemeanor, punishable by up to one year in jail, a fine of up to \$5,000, or both.
- 34) **Compliance with County’s Child Wellness Policy** – Agency must be in compliance with Los Angeles County Board of Supervisors Policy Manual, Chapter 3, Administration and Government, 3.116 Los Angeles County Child Wellness Policy. Agency shall make every effort to provide current nutrition and physical activity information to parents, caregivers, and staff as recommended by the Centers for Disease Control and Prevention, and the American Academy of Pediatrics; ensure that age appropriate nutritional and physical activity guidelines for children both in out-of-home care and in child care settings are promoted and adhered to; and provide opportunities for public education and training.
- 35) **Unlawful Solicitation** – Agency shall require all of its employees to acknowledge, in writing, understanding of and agreement to comply with the provisions of Article 9 of Chapter 4 of Division 3 of the Business and Professions Code of the State of California and shall take positive and affirmative steps in its performance to ensure that there is no violation of such provisions by its employees.
- 36) **Tobacco-Free and Cannabis-Free Environment and Tobacco and Cannabis Awareness** – Agency shall provide a tobacco-free and cannabis free environment and develop tobacco and cannabis awareness at its locations.

- 37) **HIV/AIDS Policy & Acknowledgement Form** – Ensure that agency’s Board of Directors reviews and adopts an HIV/AIDS Policy (either the SAPC policy or an agency policy which incorporates all elements of the SAPC policy). This policy shall include the provision of education and information to all staff and clients, the insurance of non-discrimination in employee hiring and client enrollment, confidentiality, and access to HIV/AIDS testing. Agency shall designate an HIV/Hepatitis A, B, and C Resource Person.
- 38) **Confidentiality Policy & Acknowledgement Form** – Agency agrees to maintain the confidentiality of its records and information including, but not limited to, billings, County records, and participant records, in accordance with all applicable Federal, State, and local laws, ordinances, rules, regulations, and directives relating to confidentiality. Agency shall inform all its officers, employees, agents, subcontractors, and others providing services hereunder of said confidentiality provision of this Agreement. Policy should contain provision that will ensure client files are labeled with unique identifiers that do not contain client names or any other identifying information.
- 39) **Sexual Harassment and Contact Policy & Acknowledgement Form** – Ensure that agency’s Board of Directors reviews and adopts a “Zero Tolerance” Sexual Harassment policy (either the County of Los Angeles’ policy or an agency policy which incorporates all elements of the County of Los Angeles’ policy). This policy shall be applicable to all board members, employees, Agency’s with which the agency does business, and clients. In addition, sexual harassment and sexual contact shall be prohibited between participants, and service employee staff and administrative staff, including members of the Board of Directors. Such prohibition policy shall remain in effect for no less than six (6) months after a participant exits recovery service program.
- 40) **Safely Surrendered Baby Law Awareness Policy & Acknowledgement Form** – Agency shall notify and provide to its employees and shall require each subcontractor to notify and provide to its employees, a fact sheet regarding the Safely Surrendered Baby Law, its implementation in Los Angeles County, and where and how to safely surrender a baby. For more information and promotional material, please visit the following link: <https://www.211la.org/safely-surrender-baby>.
- 41) **Servicing or Referring the Disabled and Hearing-Impaired Policy & Acknowledgement Form** – Agency shall designate at least one employee as “Disability Access Coordinator” to ensure program access for disabled individuals, and to receive and resolve complaints regarding access for disabled persons at Agency’s facility(ies).
- 42) **Non-Discrimination in Employment Policy & Acknowledgement Form** – Agency shall not discriminate against any employee or applicant for employment because of race, national origin, ethnic group identification, religion, age, sex, sexual orientation, color, physical or mental disability, ancestry, marital status and/or political affiliation, or status as disabled. Agency shall take affirmative action to ensure that qualified applicants are employed in accordance with requirements of all applicable Federal and State laws and regulations.
- 43) **Non-Discrimination in Services Policy & Acknowledgement Form** – Agency shall not discriminate in the provision of services to participants (including but not limited to, services provided to Medi-Cal eligible [or other similarly eligible] beneficiaries), hereunder because of race, national origin, ethnic group identification, religion, age, sex, sexual orientation, color, physical or mental disability, ancestry, marital status and/or political affiliation, in accordance with requirements of Federal and State laws and regulations.
- 44) **Complaints Policy** – Agency must develop, maintain, and operate procedures for receiving, investigating, and responding to complaints in accordance with DHCS Mental Health and Substance Use Disorder Services (MHSUDS) 18-010E (or most current version) and the most

current version of the SAPC Provider Manual.

- 45) **Employee Jury Service Policy** – Agency must have and adhere to a written policy that provides that its Employees shall receive from the agency, on an annual basis, no less than five (5) days of regular pay for actual jury service. The policy may provide that Employees deposit any fees received for such jury service with the agency or that the agency deducts from the Employee's regular pay the fees received for jury service.
- 46) **Hepatitis A, B, and C Virus Program Policy** – Agency must develop and maintain policies and procedures that are adopted by its Board of Directors, and address priority admissions, confidentiality, charting, and all other issues necessary to ensure appropriate care and the protection of the rights of all patients that test positive for Hepatitis. Policies must include the appointment of a resource person who shall oversee the organization's hepatitis-related activities and ensure compliance with agency's procedures.
- 47) **Tuberculosis Program Requirement** – Agency shall implement infection control procedures that are consistent with CCR, Title 17, 2500, to prevent the transmission of tuberculosis (TB), including screening and identifying those individuals at high risk of becoming infected, and reporting all individuals with active TB to the Los Angeles County TB Control Program in accordance with LA County Health and Safety Code and all relevant confidentiality regulations.
- 48) **Priority Populations Policy** – Agency shall establish protocols and procedures to identify, engage, and enroll into treatment, priority populations as established by the County and in accordance with Substance Abuse Prevention and Treatment Block Grants. Priority populations include pregnant injection drug users, pregnant substance users, injection drug users, and patients with HIV/AIDS.
- 49) **Evidence Based Practices** – Agency shall submit documentation of its Evidence Based Practices. At a minimum, Motivational Interviewing and Cognitive Behavioral Therapy must be incorporated into all treatment services and maintain a protocol for ensuring fidelity to their practices.
- 50) **Storage and Safeguarding Medications Policy (residential treatment only)** – Agency shall have a written policy regarding the use, storage, and safeguarding of prescribed medications.
- 51) **Culturally and Linguistically Appropriate Services (CLAS)** – Agency must submit a completed and signed acknowledgement of compliance with Culturally and Linguistically Appropriate standards.
- 52) **CLAS: Culturally and Linguistically Diverse Governance, Leadership, and Workforce Policy** – Agency must recruit and promote culturally and linguistically diverse governance, leadership, and workforce that are reflective and responsive to the primary populations served. This provision includes representation on the Board of Directors or other influencing body.
- 53) **Drug Screening (residential treatment only)** – Agency shall submit a copy of its written policy statement regarding drug screening and procedures that protect against the falsification and/or contamination of any specimen sample collected for drug screening.
- 54) **Referral for Physical Health, Mental Health and Emergency Services (residential treatment only)** – Agency shall have in place and submit a copy of its written procedures for obtaining physical, mental, and emergency services.
- 55) **Trafficking Victims Protection Act of 2000** – Agency shall notify and provide to its employees and shall require each subcontractor to notify and provide to its employees, a fact sheet regarding the Trafficking Victims Protection Act of 2000, Section 106(g), its implementation in Los Angeles

County, including an education component. (See SAPC Bulletin 16-02). Annual training requirements must include Trafficking Victims education. Training is available at the following link: <https://www.dhs.gov/blue-campaign/awareness-training>.

- 56) **Access to Treatment Policy** – Agency must submit procedures and protocols to ensure compliance to State and County timely access to treatment standards that include screening for emergency medical conditions pursuant to 42 CFR 437.114 and the immediate referral to emergency medical care; assessment beginning within no more than five (5) days after screening or referral; when timeliness standards cannot be met, how agency will offer referrals to another provider or assist with referrals; and no additional barriers to care, including but not limited to, unreasonable pre-entry requirements, additional fees/payments, or unreasonable burdens to access care.
- 57) **EHR Outage Procedures** – Agency must have procedures to regularly monitor access for appropriate use, ensure there are practices in place to prevent inappropriate access as well as the termination of user access within 24 hours of employment termination.
- 58) **Medications for Addiction Treatment** – Agency must provide protocols to ensure that medications for addiction treatment services are discussed and offered as a concurrent treatment option for all adult patients enrolled in DMC treatment for whom they are clinically appropriate.

Do not hesitate to contact us for assistance in completing any of the required documents.

Revised December 2019

REQUIRED OPIOID TREATMENT PROGRAM CONTRACT DOCUMENTATION

The following is a list of documents your agency is required to provide to Substance Abuse Prevention and Control (SAPC) as part of the application process with the County of Los Angeles for Opioid Treatment Program (OTP). Items 1 - 9 must be submitted or your application will be deemed incomplete and will not be reviewed.

Please include a copy of each certificate, roster, or other documentation listed below:

- 1) Drug Enforcement Agency (DEA) Registration**
 - a. For each location
 - b. For each physician

- 2) Data 2000 Physician Waiver (X number)** – Evidence of physician enrollment in Fee for Service (FFS) providers to prescribe and bill buprenorphine

- 3) Substance Abuse and Mental Health Services Administration (SAMHSA) Opioid Treatment Program Certification for each site**

- 4) Clinical Laboratory Improvement Amendments (CLIA) – Certificate of Waiver OR Statement Indicating CLIA not required or Clinical Lab Registration for full lab if applicable**
 - a. As defined by CLIA, waived tests are categorized as “simple laboratory examinations and procedures that have an insignificant risk of an erroneous result.” The Food and Drug Administration (FDA) determines the criteria for tests being simple with a low risk of error and approved manufacturer’s applications for test system waiver. *If applicable, a waiver is required for each site.* List of waived tests at: <https://www.cms.gov/Regulations-and-Guidance/Legislation/CLIA/Downloads/HowObtainCertificateofWaiver.pdf>.

- 5) Dispensing/Dosing Staff Licenses** – Provide a list of all dispensing staff (full time, part time, weekend) that includes their job title and hire date. All licenses must be unrestricted and may not be on active probation or have been on probation within the last three (3) years.

- 6) Dosing/Protocol** – Provide dosing/dispensing policy which includes at a minimum, process for patient identification, process of dosing and process for manual dosing documentation if computer system is non-operable.

- 7) Take-Home Process/Protocol** – Provide take home process which includes at a minimum Step Levels, how dispensed and criteria for safeguarding take-homes.

- 8) Staff Signature Legends** – All medical staff, dispensing staff and counselors

- 9) DHCS Approved Counselor Caseload** – Counselor to patient ratio approved by DHCS.

- 10) Five-Mile Restriction** - If not previously submitted, provider may be required to submitted a justification waving or adjusting the five-mile restriction.